FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An	Authorized Committee	Office Use Only
1. NAME OF COMMITTEE (in full) USE FEC MA OR TYPE OR	ILING LABEL Example:If typing, type over the lines	
Donna Christensen Campaign		
ADDRESS (number and street) PO Box 5	197	
Check if different		
than previously reported. (ACC)		VI 00823
2. FEC IDENTIFICATION NUMBER \(\psi\)	CITY A	STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
C00320754	3. IS THIS X NEW (N) OR	AMENDED (A) VI
4. TYPE OF REPORT (Choose One)	(h) 12 Day DDE Floation Deport for the	
(a) Quarterly Reports:	(b) 12-Day PRE -Election Report for the:	_
April 15 Quarterly Report (Q1)	Primary (12P)	General (12G) Runoff (12R)
	Convention (12C)	Special (12S)
July 15 Quarterly Report (Q2)		in the
October 15 Quarterly Report (Q3)	Election on	State of
January 31 Year-End Report (YE)	(c) 30-Day POST -Election Report for the:	
	X General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election on 1 1 0 7	2 0 0 6 in the State of
5. Covering Period 1 0 1 9	2 0 0 6 through 1 1	27 2006
I certify that I have examined this Report and to the	ne best of my knowledge and belief it is true, corre	oct and complete.
Type or Print Name of Treasurer Sylvin	a Felix	
Signature of Treasurer Electronically Filed by	Sylvia Felix	Date 12 06 2006
NOTE : Submission of false, erroneous, or incom	nplete information may subject the person signing	this Report to the penalties of 2 U.S.C 437g.
Office Use Only		FEC FORM 3 (Revised 02/2003)